



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 6Date 7-27-21

Name <u>Kids World</u>	License No. <u>6315</u>
Address <u>2401 Ave Meridian MS</u>	
Center/Organization/Individual	
Purpose <u>Off site visit</u>	Director <u>Carlene Davis</u>
Mileage Start _____	Mileage End _____
County <u>Lauderdale</u>	Telephone No. <u>601- 678- 1041</u>
Time In _____	Time Out _____
Total Time _____	

Findings/Comments P.O.E on Child Care Encounter dated 7-8-21

required facility to submit documentation of valid
Letter of suitability Requested documentation received 7-27-21
upon review P.O.C. was followed violation was corrected.

Center Director/Designee/Individual

Mia Bream
 Child Care Representative

 White Copy - Facility File
 Yellow Copy - Operator